

## "FFF ADDRESS" INDICATION FORM

Address to: **Mail Stop M Correspondence**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Fax to:  
**571-273-6500**

- OR -

Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with the following customer number

Customer Number

Type Customer Number here

OR

Request for Customer Number (PTO/SB/125) attached hereto

in the following listed application(s) for which the Issue Fee has been paid or patent(s)

PATENT NUMBER (if known)	APPLICATION NUMBER
6,986,898	09/340,391

(check one)

Applicant/Inventor

Willem F. Gadiano/

**Signature**

Attorney or Agent of record

87.136

.....  
(Reg. No.)

Willem F. Gadiano

Typed or printed name

Assignee of record of the entire interest. See 37 C.F.R. § 3.71. Statement under 37 C.F.R. § 3.73(b) is enclosed.

703-816-4057

Requester's telephone number

Assignment recorded at Reel Frame

November 9, 2012

Date \_\_\_\_\_

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.\*

\*Total of 1 form/s are submitted.